PCIP Third Party Administrator – Performance Report December 2013

Medical and Pharmacy Claims Processing	Contract Requirement	Level Met	Data Descriptions
"Clean" claims processed within 10 business days.	90%	99.7%	5,787 of 5,804 total claims
"Clean" claims processed within 30 calendar days.	100%	100%	5,804 of 5,804 total claims
Financial accuracy of claims paid.	99%	100%	\$1,807,058.24 of \$1,807,058.24 audited
Claims processed (paid and unpaid) without a payment error.	98%	100%	83 of 83 claims audited
Procedural accuracy rate for processing of claims.	97%	100%	83 of 83 claims audited
Disputed claims resolved within 30 calendar days	95%	100%	24 disputed claims
Disputed claims resolved within 60 calendar days	100%	N/A	0 disputed claims

Subscriber Health Care Service Appeals	Contract Requirement	Level Met	Data Descriptions
Resolution of non-urgent pre-service, post-service, and	98%	100%	4 (0 appeals, 4 complaints)
pharmacy appeals and complaints within 30 calendar days.			
Resolution of urgent pre-service and pharmacy appeals within	80%	N/A	0 appeals
48 hours.			

Customer Service - Subscribers	Contract Requirement	Level Met	Data Descriptions
Calls answered within 30 seconds.	85%	95%	908 of 956 calls answered in 30 seconds; average of 13 seconds
Subscriber issues resolved within the same business day.	90%	93.9%	326 of 347 issue calls
Maximum call abandonment rate.	5%	1.4%	13 of 956 calls
Maximum line busy rate.	3%	0%	0 busy out of 987 calls
Voicemails answered within two business days.	90%	N/A	0 voicemails
Subscriber complaints resolved within 30 calendar days.	95%	100%	4 complaints

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Provider Technical Support	Contract Requirement	Level Met	Data Descriptions
Calls answered within 30 seconds.	85%	92.1%	1,242 of 1,347 calls answered in 30 seconds; average of 15 seconds
Provider issues resolved within the same business day.	90%	94.3%	1,300 of 1,378 issue calls
Maximum call abandonment rate.	5%	0.5%	7 of 1,347 calls
Maximum line busy rate.	3%	0%	0 of 1,356 calls
Voicemails answered within two business days.	90%	N/A	0 voicemails
Provider appeals resolved within 30 calendar days.	95%	100%	1 provider appeal

Independent External Review (IER)	Contract Requirement	Level Met	Data Descriptions
Expedited IER requests transmitted to administrative vendor within two business days.	100%	N/A	0 requests
Standard IER requests transmitted to administrative vendor within five business days.	100%	N/A	0 requests

Administrative Hearings	Contract Requirement	Level Met	Data Descriptions
Requests for subscriber case files transmitted to Managed Risk Medical Insurance Board within five business days.	100%	N/A	0 requests